



# City of Tucson

## Domestic Partnership Registration Statement

We the undersigned declare that:

1. We are in a relationship of mutual support, caring and commitment and are responsible for each other's welfare;
2. Neither of us is in a marriage expressly recognized by the State of Arizona or in any domestic partnership and/or civil union with another person;
3. We are both at least 18 years of age;
4. We are not related by blood closer than would bar marriage in the State of Arizona, and we are mentally competent to consent to contract;
5. We currently share a primary residence, we intend to do so for the indefinite future, and we are each other's sole domestic partner;
6. We will file a termination of partnership if there is a change in the status of our relationship such that we cease to meet the criteria for domestic partnership.

First

M.I.

Last

Date of Birth

Mailing Address

City, State, Zip

Signature

Subscribed and sworn to (or affirmed) before me  
on \_\_\_\_\_, 2\_\_\_\_\_  
by \_\_\_\_\_

Notary Public for the State of Arizona  
My Commission Expires: \_\_\_\_\_

First

M.I.

Last

Date of Birth

Mailing Address

City, State, Zip

Signature

Subscribed and sworn to (or affirmed) before me  
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Notary Public for the State of Arizona  
My Commission Expires: \_\_\_\_\_

City of Tucson  
Filing Date \_\_\_\_\_  
Reg. Number \_\_\_\_\_